NAME (Print/type)

Nichola9

PTO/SB/05 (06-03) Approved for use through 07/31/2003. OMB 0651-0032 U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE repethe Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number Attorney Docket No. PC25700A UTILITY PATENT APPLICATION Sidath Dhammika Katugampola First Inventor TREATMENT OF HYPERTENSION TRANSMITTAL Title EV 102813036 US Express Mail Label No. (Only for new nonapplications under 37C.F.R. §1.53(b)) Mail Stop Patent Application APPLICATION ELEMENTS ADDRESS TO: Commissioner for Patents See MPEP chapter 600 concerning utility patent application contents. Box 1450 Alexandria, VA 22313-1450 1. CD-ROM or CD-R in duplicate, large table or Fee Transmittal Form (e.g., PTO/SB/17) 7. (Submit an original, and a duplicate for fee processing) computer Program (Appendix) Nucleotide and/or Amino Acid Sequence Submission 2. Applicant claims small entity status (if applicable, all necessary) See 37 CFR 1.27 Specification Computer Readable Copy (CRF) [Total Pages <u>25</u> ] (preferred arrangement set forth below) b. Specification Sequence Listing on: Descriptive title of the Invention Cross References to Related Applications CD-ROM or CD-R (2 copies) Statement Regarding Fed sponsored R&D Reference to sequence listing, a table. or a computer program listing appendix Statement verifying identity of above copies Background of the Invention ACCOMPANYING APPLICATION PARTS Brief Summary of the Invention 9. Assignment Papers (cover sheet & document(s)) Brief Description of the Drawings (if filed) **Detailed Description** 10. 37 CFR 3.73(b) Statement Power of Attorney Claim(s) (when there is an assignee) Abstract of the Disclosure 11. English Translation Document (if applicable) 12. Information Disclosure Copies of IDS ✓ Drawing(s) (35 U.S.C. 113) [Total sheets Statement (IDS)/PTO-1449 Citations 1 Oath or Declaration [Total pages 2 13. Preliminary Amendment Newly executed (copy) 14. Return Receipt Postcard (MPEP 503) (Should be specifically itemized) Copy from a prior application (37 CFR §1.63(d)) (for continuation/divisional with Box 18 completed) 15 Certified Copy of Priority Document(s) (if foreign priority is claimed) i. **DELETION OF INVENTOR(S)** Signed statement attached deleting inventor(s) 16. Nonpublication Request under 35 U.S.C. 122 named in the prior application, see 37 CFR (b)(2)(B)(i). Applicant must attach form PTO/SB/35 1.63(d)(2) and 1.33(b). or its equivalent. Application Data Sheet. See 37 CFR 1.76 17. Other: If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, 18 or in an Application Data Sheet under 37CFR 1.76. item(s) Continuation Divisional Continuation-in-part (CIP) of prior application No: \_ Prior application information: Examiner Group/Art Unit: listed For CONTINUATION OR DIVISIONAL APPS only; The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation <u>can only</u> be relied upon when a portion has been inadvertently omitted from the submitted application parts CORRESPONDENCE ADDRESS 19. 28523 Customer Number Correspondence address below Name **Address** City State Zip Code Country Telephone Fax

This collection of information is required by 37 CFR 1.53(b). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.CV122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Mail Stop Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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Registration No. (Attorney/Agent)

PTO/SB/17 (10-03)
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FEE TRANSMITTAL						Complete if Known								
						Application Number To be assigned								
for FY 2004						Filing Date Fe					ebruary 19, 2004			
Effective 10/01/2003. Patent fees are subject to annual revision.						First Named Inventor S				Si	Sidath Dhammika Katugampola			
Ellective 10/01/2003. Faterit lees are subject to annual revision.						Examiner Name To				To be assigned				
Applicant claims small status. See 37 CFR 1.27											To be assigned			
Total Amount of Payment \$1200.00						PC PC25700A								
METHOD OF PAYMENT (check all that apply)						FEE CALCULATION (continued)								
☐ Check ☐ Credit Card ☐ Money ☐ Other ☐ None Order						3. ADDITIONAL FEES Large Entity Small Entity								
☑ Deposit Account:							Fee (\$)	Fee Code	Fee	-	Fee Paid			
Deposit Account Number	16-1445	5				1051	130	2051	65	Surcharg	e – late fee or oath			
Deposit Account Name	Pfizer Ir	nc				1052	50	2052	25	Surcharg	e-late filing fee or o	cover sheet		
The Director is authorized to: (check all that apply)						1053	130	1053	130	Non-English specification				
☐ Charge fee(s) indicated below ☐ Credit any overpayments						1812	2,520	1812	2,520	Forfiling a request for Ex Parte reexamination				
☐Charge any additional fee(s) or any underpayment of fee(s)						1804	920*	1804	920*	Requesting publication of SIR prior to				
Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.						1805	1,840*	1805	1,840*	Examiner action Requesting publication of SIR after Examiner action				
FEE CALCULATION						1251	110	2251	55	Extension for reply within first month				
1. BASIC FILING FEE						1252	420	2252	210	Extension	Extension for reply within second month			
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2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE						1501	1,330	2501	665	Utility issue fee (or reissue)				
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1203 290	2203	145	Multiple depende	1801	770	2801	385	examined (37 CFR 1.129(b)) Request for Continued Examination (RCE)						
1204 86	2204	43 **Reissue independent claims over original patent					900	1802	900	Request for expedited examination of a design application				
1205 18 2205 9 **Reissue independent claims over original patent							Other Fee (specify)							
(\$) 430														
**or number previously paid, if greater; For Reissues, see above							*Reduced by Basic Filing Fee Paid Subtotal (3) (\$) 0							
SUBMITTED BY  Name (Printed/Type) Nicholas I. Slepchuk, Jr.						Region	tration No	130.		omplete i	f applicable)	647 554	7222	
Name (Printed/Type) Nicholas I. Slepchuk, Jr.					Registration No. (Attorney Agent) 72,174 Telephone 617-551-3223					3223				
Signature		1/1	$\mathcal{W}$											

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## CERTIFICATE OF EXPRESS MAIL FILING

PFIZER DOCKET NUMBER: PC25700A
APPLICATION NUMBER: To be assigned
TITLE: TREATMENT OF HYPERTENSION
INVENTOR: Sidath Dhammika Katugampola
I hereby certify that this patent application is being deposited with the United States Postal Service as Express Mail number EV 102813036 US in an envelope addressed to Mail Stop Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on this 19th day of February 2004.
By: (Signature of person mailing)
Heather Randhahn (Typed or printed name of person)

Pfizer Inc.
Patent Department, MS 8260-1611
Eastern Point Road
Groton, CT 06340